



Fulton County Board of Commissioners
Agenda Item Summary

14-0846

BOC Meeting Date
 10/15/2014

Requesting Agency
 Sheriff's Office

Commission Districts Affected
 All Districts

Requested Action *(Identify appropriate Action or Motion, purpose, cost, timeframe, etc.)*

Request approval to renew existing contract- Sheriff's Office, RFP #11RFP01272011A-CC Inmate Physical and Mental Health Services for the Fulton County Jail in the amount of \$16,213,224, with Corizon, Inc. F/K/A Correctional Medical Services to provide physical and mental healthcare services. This action exercises the fourth of four renewal options. No renewal options remain. Effective dates: January 1, 2015 through December 31, 2015.

Requirement for Board Action *(Cite specific Board policy, statute or code requirement)*

In accordance with Purchasing Code Section 102-394(6), the Purchasing Department shall present all renewal requests to the Board of Commissioners at least 90 days prior to the contract renewal date or 60 days if the contract term is six (6) months or less.

Is this Item Goal Related? *(If yes, describe how this action meets the specific Board Focus Area or Goal)*

No

Is this a purchasing item?

Yes

Summary & Background

(First sentence includes Agency recommendation. Provide an executive summary of the action that gives an overview of the relevant details for the item.)

The Sheriff's Office requests approval to renew an existing contract to provide Physical and Mental Healthcare to the inmates at the Fulton County Jail.

This contract provides both physical and mental healthcare to inmates at the jail facility and will allow the following services to continue as required under Consent Order Civil Action NO 04-C1416-MHS; intake screening, exams, sick call, optometry, dental emergency care, pharmacy, radiological, laboratory services, chemical treatment dependency program, psychological services, women's program, behavior management program, and psychological evaluations.

CURRENT CONTRACT HISTORY	BOC ITEM	DATE	DOLLAR AMOUNT
Original Award Amount	11-0439	05/18/2011	\$ 7,090,596
1 st Renewal	11-0984	12/07/2011	\$ 7,320,750
2 nd Renewal	12-0281	04/04/2012	\$ 7,320,750
2 nd Renewal	12-0808	09/19/2013	\$15,142,750
3 rd Renewal	13-0975	12/18/2014	\$15,667,068
4th Renewal			\$16,213,224
Total Revised Amount			\$69,440,521

Agency Director Approval

County Manager's Approval

Typed Name and Title

Felicia Strong-Whitaker, Interim Director

Phone

(404) 612-5800

Signature

Date

Contract & Compliance Information	<i>(Provide Contractor and Subcontractor details.)</i>
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Contract Value: \$16,213,224.00
Prime Vendor: **Corizon, Inc F/K/A Correctional Medical Services**
Prime Status: **Non-Minority**
Location: St. Louis, MO
County: St. Louis County
Prime Value: \$14,166,521.00 or 87.38%

Subcontractor: **Bio-Reference Laboratories, Inc.**
Subcontractor Status: **Non-Minority**
Location: Elmwood Park, NJ
County: Passaic County
Contract Value: \$235,530.00 or 1.45%

Subcontractor: **CharDonnay Dialysis, Inc.**
Subcontractor Status: **White Female Business Enterprise Non-Certified**
Location: Danville, IL
County: Vermillion County
Contract Value: \$130,542.00 or 0.81%

Subcontractor: **Global Diagnostic**
Subcontractor Status: **African American Male Business Enterprise Certified**
Location: Conyers, GA
County: Rockdale County
Contract Value: \$34,280.00 or 0.21%

Subcontractor: **Recovercare, LLC**
Subcontractor Status: **Non-Minority**
Location: Norcross, GA
County: Gwinnett County
Contract Value: \$8,894.00 or 0.05%

Subcontractor: **Clinical Solutions Pharmacy**
Subcontractor Status: **White Female Business Enterprise Non-Certified**
Location: Nashville, TN
County: Davidson County
Contract Value: \$600,000.00 or 3.70%

Subcontractor: **Bravior Healthcare Solutions**
Subcontractor Status: **Non-Minority**
Location: Atlanta, GA
County: Fulton County
Contract Value: \$235,000.00

Continued

Subcontractor:	Institutional Eye Care
Subcontractor Status:	Non-Minority
Location:	Lewisburg, PA
County:	Union County
Contract Value:	\$117.00 or 0.00%
Subcontractor:	Iron Mountain Record Management
Subcontractor Status:	Non-Minority
Location:	Royersford, PA
County:	Montgomery County
Contract Value:	\$1,310.00 or 0.01%
Subcontractor:	Rx Reverse Distributors
Subcontractor Status:	Non-Minority
Location:	Sebastian, FL
County:	Indian River County
Contract Value:	\$166 or 0.00%
Subcontractor:	Dr. Carla Dixon-Bedford
Subcontractor Status:	African American Female Business Enterprise Non Certified
Location:	Atlanta, GA
County:	Fulton County
Contract Value:	\$77,376.00 or 0.48%
Subcontractor:	Dr. Roy Brooks
Subcontractor Status:	African American Male Business Enterprise Non Certified
Location:	Atlanta, GA
County:	Fulton County
Contract Value:	\$66,560.00 or 0.41%
Subcontractor:	Dr. Joyce Crosby
Subcontractor Status:	African American Female Business Enterprise Non Certified
Location:	Atlanta, GA
County:	Fulton County
Contract Value:	\$166,400.00 or 1.03%
Subcontractor:	Mendus, Inc. (Dr. Delquis Mendoza)
Subcontractor Status:	Hispanic Male Business Enterprise Non Certified
Location:	Atlanta, GA
County:	Fulton County
Contract Value:	\$68,900.00 or 0.42%
Subcontractor:	National Correctional Medical Association (Dr. Michael Pompey)
Subcontractor Status:	African American Business Enterprise Non Certified
Location:	Atlanta, GA
County:	Fulton County
Contract Value:	\$183,768.00 or 1.13%
Subcontractor:	Memorial Family Medicine (Dr. Tassew Tesfaye)

Subcontractor Status: African American Female Business Enterprise Non Certified
Location: Atlanta, GA
County: Fulton County
Contract Value: \$84,864.00 or 0.52%

Subcontractor: CTV Medical Incorporated (Dr. Jose Villongco)
Subcontractor Status: Hispanic Male Business Enterprise Non Certified
Location: Atlanta, GA
County: Fulton County
Contract Value: \$137,800.00 or 0.85%

Subcontractor: Stericycle
Subcontractor Status: Non-Minority
Location: Lake Forest, IL
County: Lake County
Contract Value: \$15,196.00 or 0.09%

Total Contract Value: \$16,213,224.00 or 100 %
Total M/FBE Values: \$2,046,703.00 or 12.62%

Contractor Type	Contractor Status	Contractor Name	Address	City	State	Zip Code	Contact Name	Contact Phone	Contact Email	Upon Approval	Amount	Percentage	Prime/Contract Value
Prime	Non-M/FBE	Corizon, Inc									\$16,213,224.00	87.38%	\$14,166,521.00
Sub	Non-M/FBE	Bio Reference Labs									\$235,530.00	1.45%	
Sub	M/FBE	CharDonnay Dialysis									\$130,542.00	0.81%	
Sub	M/FBE	Global Diagnostic									\$34,280.00	0.21%	
Sub	Non-M/FBE	Recovercare, LLC									\$8,894.00	0.05%	
Sub	WFBE	Clinical Solutions Pharmacy									\$6000,000.00	3.70%	
Sub	Non-M/FBE	Braylor Healthcare Solutions LLC									\$235,000	1.45%	
Sub	Non-M/FBE	Institutional Eye Care									\$117	0.00	
Sub	Non-M/FBE	Iron Management Record Mgmt									\$1,310.00	0.01%	
Sub	Non-M/FBE	Rx Reverse Distributors									\$166.00	0.00	
Sub	Non-M/FBE	Stericycle									\$15,196.00	0.09%	
Sub	MFBE	Dr. Bedford-Dixon, Carla									\$77,376.00	0.48%	
Sub	MBE	Dr. Roy Brooks									\$66,560.00	0.41%	
Sub	MFBE	Dr. Joyce Crosby									\$166,400.00	1.03%	

Agency Director Approval		County Manager's Approval
Typed Name and Title Felicia Strong-Whitaker, Interim Director	Phone (404) 612-5800	
Signature	Date	

Revised 03/12/09 (Previous versions are obsolete)

Continued

Sub	FBE	Dr. Medoza. Delquis									\$66,900.00	0.42%	
Sub	M/FBE	Dr. Michael Pompay									\$183,768.00	1.13%	
Sub	M/FBE	Dr. Tesfay Tassew									\$84,864.00	0.52%	
Sub	M/FBE	Dr. Villongco, Jose									\$137,800.00	0.85%	
Sub	M/FBE												
Sub	M/FBE												

Solicitation Information	NON-MFBE	MBE	FBE	TOTAL
No. Bid Notices Sent:				
No. Bids Received:				
Total Contract Value	\$16,213,224.00 or 100%			
Total M/FBE Values	\$2,046,703.00 or 12.62			
Total Prime Value	\$14,166,521.00 or 87.38			
Fiscal Impact / Funding Source <i>(Include projected cost, approved budget amount and account number, source of funds, and any future funding requirements.)</i> 100-330-3302-1158: General, Sheriff, Medical Services - \$16,213,224				
Exhibits Attached <i>(Provide copies of originals, number exhibits consecutively, and label all exhibits in the upper right corner.)</i> Exhibit 1: Contract Renewal Evaluation Form Exhibit 2: Contract Renewal Form Exhibit 3: Contractor Performance Report				
Source of Additional Information <i>(Type Name, Title, Agency and Phone)</i> Flora Eatman, Financial Supervisor, (404) 612-9241				

Agency Director Approval		County Manager's Approval
Typed Name and Title Felicia Strong-Whitaker, Interim Director	Phone (404) 612-5800	
Signature	Date	

Revised 03/12/09 (Previous versions are obsolete)

Procurement

Contract Attached: No	Previous Contracts: Yes		
Solicitation Number: 11RFP01272011A-CC	Submitting Agency: Sheriff's Office	Staff Contact: Leighton Graham, Colonel	Contact Phone: 404-612-6782

Description:**FINANCIAL SUMMARY**

Total Contract Value:	MBE/FBE Participation:
Original Approved Amount: \$ 7,090,596	Amount: %:
Previous Adjustments: \$46,136,701	Amount: %:
This Request: \$16,213,224	Amount: %:
TOTAL: \$69,440,521	Amount: %:

Grant Information Summary:

Amount Requested:	<input type="checkbox"/>	Cash
Match Required:	<input type="checkbox"/>	In-Kind
Start Date:	<input type="checkbox"/>	Approval to Award
End Date:	<input type="checkbox"/>	Apply & Accept
Match Account \$:		

Funding Line 1: 100-330-3302-1158	Funding Line 2:	Funding Line 3:	Funding Line 4:
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KEY CONTRACT TERMS

Start Date: 1/1/2015	End Date: 12/31/2015
Cost Adjustment:	Renewal/Extension Terms:

ROUTING & APPROVALS

X	Originating Department:	Carter, Jimmy	Date: 8/27/2014
	County Attorney:		Date:
X	Purchasing/Contract Compliance:	Strong-Whitaker, Felicia	Date: 10/2/2014
X	Finance/Budget Analyst/Grants Admin:	Fletcher, James	Date: 8/28/2014
	Grants Management:		Date:
X	County Manager:	O'Connor, Patrick	Date: 10/9/2014

Approved subject to BOC approval of the FY2015 Fulton County Budget. - jaf



Fulton County, GA

DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

CONTRACT RENEWAL

DEPARTMENT: Sheriff's Office

BID/RFP# DESCRIPTION: 11RFP01272011A-CC Inmate Physical & Mental Health

BID/RFP# NUMBER: 11RFP01272011A-CC

ORIGINAL APPROVAL DATE: May 18, 2011

RENEWAL PERIOD: FROM: January 1, 2015 **THROUGH** December 31, 2015

RENEWAL OPTION # 4 OF 4

NUMBER OF RENEWAL OPTIONS: 4

RENEWAL AMOUNT: \$16,213,224

COMPANY'S NAME: Corizon, Inc F/K/A Correctional Medical Services

ADDRESS: 12647 Olive Blvd.

CITY: St. Louis

STATE: Missouri

ZIP: 63141

SIGNATURES: SEE NEXT PAGE

SIGNATURES:

Vendor agrees to accept the renewal option and abide by the terms and conditions set forth in the contract and specifications for Bid/RFP#

(Person signing must have signature authority for the company/corporation)

NAME: _____ (Print)
(CEO, President, Vice President)

VENDOR'S SIGNATURE: _____ **DATE** _____

ATTEST:

_____ **NOTARY PUBLIC:** _____

TITLE: _____ **COUNTY:** _____

SEAL (Affix) **MY COMMISSION EXPIRES:** _____

ATTEST:

FULTON COUNTY, GEORGIA

_____ **DATE:** _____
JOHN H. EAVES, CHAIRMAN
BOARD OF COMMISSIONERS

_____ **DATE:** _____
MARK MASSEY
CLERK TO THE COMMISSION

DEPARTMENT AUTHORIZES RENEWAL OPTION ON THE AFOREMENTIONED BID/RFP:

DEPARTMENT HEAD: _____ (Print)

DEPARTMENT HEAD SIGNATURE: _____ **DATE** _____

Please indicate if the following are provided:

- ☐ **BOC Chairperson's signature required on renewals \$ 50,000.00 or more or any Bid/RFP previously approved by the Board of Commissioners of Fulton County.**
- ☐ **A copy of the current Certificate of Insurance must be attached to all renewals.**
- ☐ **Current Performance and Payment Bonds attached (If required)**
- ☐ **Minimum of four (4) signature pages required.**

Submit Form

DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE			
CONTRACTORS PERFORMANCE REPORT PROFESSIONAL SERVICES			
Report Period Start	Report Period End	Contract Period Start	Contract Period End
1/1/2014	8/22/2014	1/1/2014	12/31/2014
PO Number			PO Date
Department	SHERIFF		
Bld Number	11RFP01272011A-CC		
Service Commodity			
Contractor	Corizon, Inc, F/K/A Correctional Medical Services		Reset
<p>0 = Unsatisfactory <i>Achieves contract requirements less than 50% of the time, not responsive, effective and/or efficient, unacceptable delay, incompetence, high degree of customer dissatisfaction.</i></p> <p>1 = Poor <i>Achieves contract requirements 70% of the time. Marginally responsive, effective and/or efficient; delays require significant adjustments to programs; key employees marginally capable; customers somewhat satisfied.</i></p> <p>2 = Satisfactory <i>Achieves contract requirements 80% of the time; generally responsive, effective and/or efficient; delays are excusable and/or results in minor program adjustments; employees are capable and satisfactorily providing service without intervention; customers indicate satisfaction.</i></p> <p>3 = Good <i>Achieves contract requirements 90% of the time. Usually responsive; effective and/or efficient; delays have not impact on program mission; key employees are highly competent and seldom require guidance, customers are highly satisfied.</i></p> <p>4 = Excellent <i>Achieves contract requirements 100% of the time. Immediately responsive; highly efficient and/or effective; no delays; key employees are experts and require minimal directions; customers expectations are exceeded.</i></p>			
1. Quality of Goods/Services (-Specification Compliance - Technical Excellence - Reports/Administration - Personnel Qualification)			
<p>Comments:</p> <p><input type="radio"/> 0 Employee turnover has a direct effect on the quality and continuity of care provided to the inmates. The employee turnover rate has been well below 50%. The employee turnover rate is currently 32%. In 2013, it was 40%, in 2012 33% and in 2011 31 %.</p> <p><input type="radio"/> 1 Positions filled to date is 96% or (173,658 hours worked year to date).</p> <p><input type="radio"/> 2 58% (112 of 194) of the current employees have been employed since the start of the contract in 2011.</p> <p><input checked="" type="radio"/> 3</p> <p><input type="radio"/> 4</p>			
2. Timeliness of Performance (-Were Milestones Met Per Contract - Response Time (per agreement, if applicable) - Responsiveness to Direction/Change - On Time Completion Per Contract)			
<p>Comments:</p> <p><input type="radio"/> 0 An average of 2,024 inmates per month are medically screened by Corizon medical staff.</p> <p><input type="radio"/> 1 An average of 1,996 inmates were tested for exposure to tuberculosis every month.</p> <p><input type="radio"/> 2 To date, 250 inmates have tested positive for exposure to tuberculosis with treatment provided by Corizon medical staff.</p> <p><input type="radio"/> 3 To date, 8,950 inmates have been tested for syphilis and 365 tested positive for syphilis with treatment provided by Corizon medical staff.</p> <p><input checked="" type="radio"/> 4 To date, 465 individuals have been detoxed at the jail by Corizon medical staff for substance abuse withdrawal (alcohol, cocaine, meth, prescription drugs).</p> <p><input type="radio"/> 0 There were 2,624 contacts by Corizon mental health staff with inmates for Mental Health Services per month.</p> <p><input type="radio"/> 1 There was an average of 100 inmates admitted and treated by Corizon in the Acute Psychiatric Unit of the jail.</p> <p><input type="radio"/> 2 An average of 79 inmates per month were treated for suicidal ideation and placed on suicide watch by Corizon Mental Health staff.</p>			
3. Business Relations (-Responsiveness to Inquiries - Prompt Problem Notifications)			
<p>Comments:</p> <p><input type="radio"/> 0 Corizon has been responsive to formal grievances submitted by the inmates.</p> <p><input type="radio"/> 1 2% of the inmates at the jail have filed formal grievances concerning medical issues.</p> <p><input type="radio"/> 2 95% of inmate grievances were resolved through explanation and clarification with the inmate the remaining 5% were referred to the Director of Health Services for resolution.</p> <p><input checked="" type="radio"/> 3 Inmate grievances were responded to within four days.</p> <p><input type="radio"/> 4</p>			
4. Customer Satisfaction (-Met User Quality Expectations - Met Specification - Within Budget - Proper Invoicing - No Substitutions)			
<p>Comments:</p> <p><input type="radio"/> 0 Corizon launched the first Electronic Medical Record at the jail in February 2014.</p> <p><input type="radio"/> 1 Corizon conducts utilization management and reviews the utilization of inmates who are referred to Grady Hospital's Emergency Department, specialty clinics and inpatient hospitalizations.</p> <p><input type="radio"/> 2 Emergency Room trips for inmates average 1 per day out of an average daily population of 2500 inmates.</p> <p><input type="radio"/> 3 Currently, there are 85 inmates (out of 2500) approved and scheduled for specialty clinic appointments at Grady Hospital.</p> <p><input checked="" type="radio"/> 4 Inmates admitted to Grady Hospital as inpatients average 12 per month.</p>			
5. Contractors Key Personnel (-Credentials/Experience Appropriate - Effective Supervision/Management - Available as Needed)			
<p>Comments:</p> <p><input type="radio"/> 0 All Key Management Team positions filled:</p> <p><input type="radio"/> 1 Administrator</p> <p><input type="radio"/> 2 Medical Director</p> <p><input type="radio"/> 3 Director of Mental Health</p> <p><input type="radio"/> 4 Chief Dentist</p> <p><input type="radio"/> 0 Director of Nursing</p> <p><input type="radio"/> 1 Medical Records Administrator</p>			
Overall Performance Rating:	3.6		
Would you select/recommend this vendor again? (Check box for Yes. Leave Blank for No)	Rating completed by: George Herron		
<input checked="" type="radio"/> Yes <input type="radio"/> No			
Department Head Name	Department Head Signature	Date	
		8/27/2014	

Submit Form

Contract Renewal Evaluation Form

Contract Renewal Evaluation Form is to be completed by user department

Date:	August 13, 2014
Department:	SHERIFF'S OFFICE
Contract Number:	11RFP01272011A-CC
Contract Title:	Inmate Physical and Mental Health Services

Instructions:

It is extremely important that every contract be rigidly scrutinized to determine if the contract provides the County with value. Each renewal shall be reviewed and answers provided to determine whether services should be maintained, services/scope reduced, services brought in-house or if the contract should be terminated. Please submit a completed copy of this form with all renewal requests.

1. Describe what efforts were made to reduce the scope and cost of this contract.
2. Describe the analysis you made to determine if the current prices for this good or service is reflective of the current market. Check all applicable statements and provide documentation:

☐ Internet search of pricing for same product or service:

Date of search:	Click here to enter a date.
Price found:	Click here to enter text.
Different features / Conditions:	Click here to enter text.
Percent difference between internet price and renewal price:	Click here to enter text.

Explanation / Notes:

Click here to enter text.

☐ Market Survey of other jurisdictions:

Date contacted:	Click here to enter a date.
Jurisdiction Name / Contact name:	Click here to enter text.
Date of last purchase:	Click here to enter a date.
Price paid:	Click here to enter text.
Inflation rate:	Click here to enter text.
Adjusted price:	Click here to enter text.
Percent difference between past purchase price and renewal price:	Click here to enter text.
Are they aware of any new vendors?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Are they aware of a reduction in pricing in this industry?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How does pricing compare to Fulton County's award contract?	Click here to enter text.

Explanation / Notes:

Click here to enter text.

☐ **Other (Describe in detail the analysis conducted and the outcome):**

Contact four (4) other correctional facilities (DeKalb, Clayton, Cobb and Douglas) for costs related to inmate physical and mental healthcare services. The above correctional facilities only provided limited information and did not want to discuss cost of inmate healthcare services; therefore, a true assessment could not be determined.

3. What was the actual expenditure (from the AMS system) spent for this contract for previous fiscal year?

\$14,972,796.17

4. Does the renewal option include an adjustment for inflation? ☒ Yes ☐ No

Was it part of the initial contract?☒ Yes ☐ No

Date of last purchase:	January 1, 2014
Price paid:	\$15,667,068
Inflation rate:	Click here to enter text.
Adjusted price:	\$546,156.
Percent difference between past purchase price and renewal price:	3.486

Explanation / Notes:

Click here to enter text.

5. Is this a seasonal item or service? ☐ Yes ☒ No
6. Has an analysis been conducted to determine if this service can be performed in-house? ☐ Yes ☒ No If yes, attach the analysis.
7. What would be the impact on your department if this contract was not approved?
Sheriff's Office would not be able to fulfill its mandated responsibility.

Flora Eatman

August 13, 2014

Prepared by**Date**

Leighton Graham, Colonel

August 13, 2014

Department Head**Date**